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From: Winston Hsu, Registration No. 41,526

Serial No.: 10/708,199

Attorney Docket No.: ADTP0086USA

Subject: Response to the Office Action mailed on 09/22/2005

Total Pages: 15 pages (including cover page)

Winston Hsu 11/21/2005

ADTP0086USA0_A2_2

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PTO/SB/21 (09-04)
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/708,199	
	Filing Date	02/16/2004	
	First Named Inventor	Chien-Sheng Yang	
	Art Unit	2814	
	Examiner Name	Theresa T Doan	
Total Number of Pages in This Submission	14	Attorney Docket Number	ADTP0086USA

ENCLOSURES (Check all that apply)			
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):	
<input type="checkbox"/> Remarks			
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	North America Intellectual Property Corporation		
Signature	<i>Winston Hsu</i>		
Printed name	Winston Hsu		
Date	11/21/2005	Reg. No.	41,526

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature	<i>Janice Chen</i>		
Typed or printed name	Janice Chen	Date	11/21/2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (12-04)

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<p>Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</p> <p>FEE TRANSMITTAL For FY 2005</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p>		<p>Complete if Known</p> <table border="1"> <tr> <td>Application Number</td> <td>10/708,199</td> </tr> <tr> <td>Filing Date</td> <td>02/16/2004</td> </tr> <tr> <td>First Named Inventor</td> <td>Chien-Sheng Yang</td> </tr> <tr> <td>Examiner Name</td> <td>Theresa T Doan</td> </tr> <tr> <td>Art Unit</td> <td>2814</td> </tr> <tr> <td>Attorney Docket No.</td> <td>ADTP0086USA</td> </tr> </table>		Application Number	10/708,199	Filing Date	02/16/2004	First Named Inventor	Chien-Sheng Yang	Examiner Name	Theresa T Doan	Art Unit	2814	Attorney Docket No.	ADTP0086USA
Application Number	10/708,199														
Filing Date	02/16/2004														
First Named Inventor	Chien-Sheng Yang														
Examiner Name	Theresa T Doan														
Art Unit	2814														
Attorney Docket No.	ADTP0086USA														
TOTAL AMOUNT OF PAYMENT	(\$)	0.00													

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 50-3105 Deposit Account Name: North America Intellectual Property Corp.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fee Paid (\$)
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description

Total Claims	Extra Claims	Fee (\$)	Multiple Dependent Claims		Fee (\$)	Fee (\$)
			Fee (\$)	Fee Paid (\$)		
- 20 or HP =	x	=	50	25		
HP = highest number of total claims paid for, if greater than 20						
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Fee (\$)	Fee Paid (\$)	
- 3 or HP =	x	=	200	100		
HP = highest number of independent claims paid for, if greater than 3						

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x	=	Fee Paid (\$)

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount) _____

Other: _____

SUBMITTED BY

Signature	<i>Winston Hsu</i>	Registration No. 41,526	Telephone 302-729-1562
Name (Print/Type)	Winston Hsu	Date 11/21/2005	

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Capacitive semiconductor pressure sensor

Appl. No.	:	10/708,199	Confirmation No.	2198
Applicant	:	Chien-Sheng Yang		
Filed	:	February 16, 2004		
TC/A.U.	:	2814		
Examiner	:	Theresa T Doan		
Docket No.	:	ADTP0086USA0		
Customer No.	:	27765		

Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450

AMENDMENT

Sir:

5 In response to the Office action of Sep 22, 2005, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 5 of this paper.